

Grant Resource-Benefit Summary

<input checked="" type="checkbox"/> Preliminary
<input type="checkbox"/> Final

Grant Title Indigent Defense Formula Grant FY 2016	Contact Person (Grant Liaison) Janna Caponera
Grant Period October 1, 2015 to September 30, 2016	Phone / Ext 4638
Department Auditor	

COUNTY RESOURCES REQUIRED

	Amount	Identify Match Source
1) Cash	\$ -	
2) In-Kind	\$ -	
<input checked="" type="checkbox"/> No Match Required		

Implementation / Start Up

	Amount	Description
1) Equipment		
2) Training		
3) Inter-departmental / Other:		
<input checked="" type="checkbox"/> No Implem / Start-up Costs		

Operational / Maintenance

	Amount	Description
1) Recurring Maintenance		
2) Salary / Benefits		
3) Continuing Ed / Training		
4) Office / Program Space		
5) Travel		
6) Other:	Unknown	Defense Costs
<input type="checkbox"/> No Oper / Maintenance Costs		

NON-COUNTY RESOURCES REQUIRED

	Amount	Identify Match Source
1) Voluntary / Donation		

Benefits to County and Citizens

State defense for indigent defendants.